

CLAIMS ONLY

Application Number:

"Filing" Date

10/827.427

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 8/31/12		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep.	Depend	Indep	Depend	Indep	Depend	*		*		*	
1							51					
2							52					
3							53					
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46							96					
47							97					
48							98					
49							99					
50							100					
Total							Total					
Indep	2						Indep					
Total							Total					
Depend	7						Depend					
Total							Total					
Claims	9						Claims					